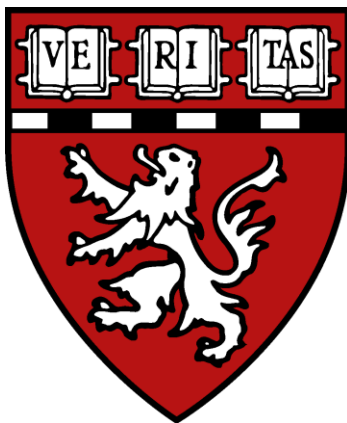


# Leadership in a Network-Model ACO

28 years of experience at the Mount Auburn  
Cambridge Independent Practice Association



Robert Janett MD, FACP  
Medical Director



# Mount Auburn Cambridge Independent Practice Association (MACIPA)

Founded in 1985 to organize physicians and negotiate managed care contracts

- 513 physician members who admit to Mount Auburn Hospital and/or Cambridge Health Alliance
- MACIPA engages in risk contracting:
  - Blue Cross Blue Shield of MA
  - Tufts Health Plan
  - Tufts Medicare Preferred (Medicare Advantage)
  - Harvard Pilgrim Health Care
  - Medicare Pioneer ACO
- 66 employees
- ~50,000 capitated lives

# What has changed in 15 years?

- Systems to attend to the needs of an entire population of patients.
- Awareness of the cost implications of our day-to-day decisions.
- Careful weighing of the issues of cost and effectiveness.
  - Getting it right: neither over-use nor under-use
  - Cost never trumps care
- Teamwork, data, & more meetings.
- Reform of the payment model to support these changes.

# Leading in times of change

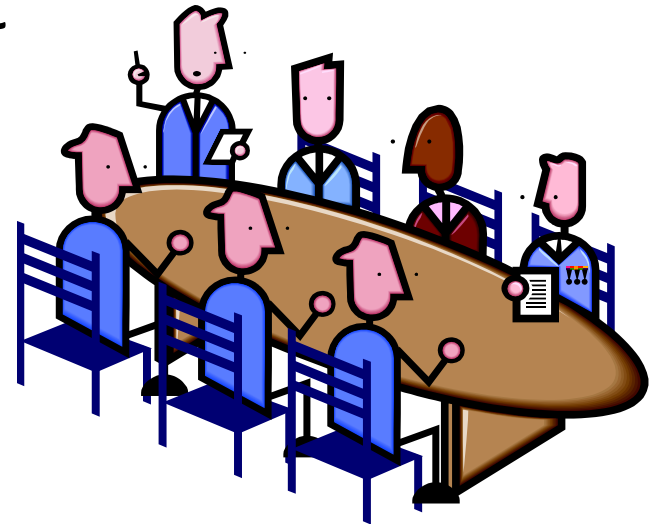
- Success and competitiveness of the organization as a whole
- Inspiration
- Positive regard
  - Acknowledgement of achievements and accomplishments
- Do processes and systems support the change?
- Physician involvement in the organization
- Match expectations with what can realistically be delivered

# Transformation of Practices

- MACIPA does not own the practices
  - Influence through education, data, peer pressure, and incentives
- Central infrastructure to support care management in the practices
- From individuals to populations
- The journey from utilization management to quality improvement
- Alignment of financial rewards to support better care

# IPA Infrastructure

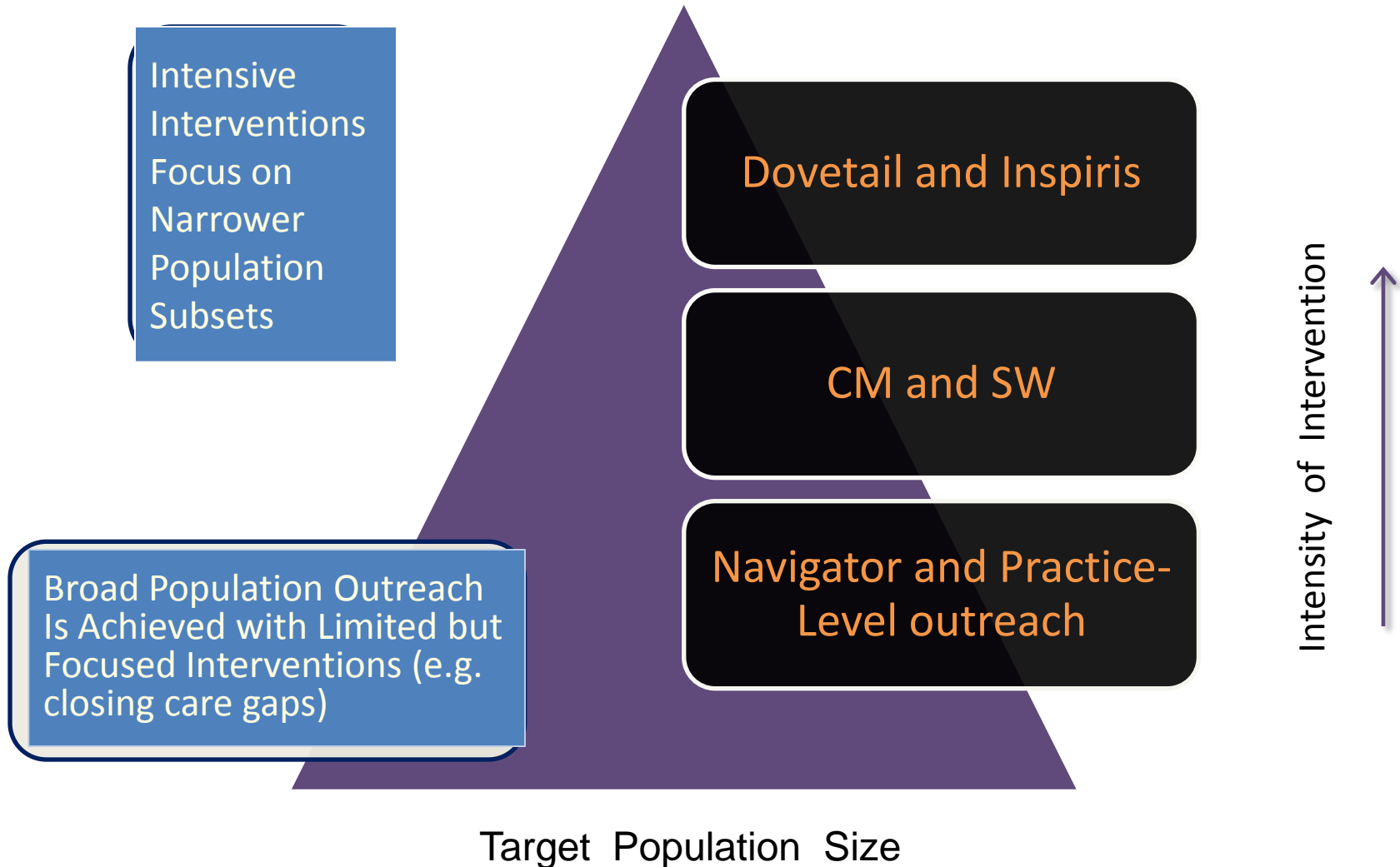
- Care Management
- Medical Management
- Social Work Department
- Pharmacy Management
- Data & Reporting
- Contracting
- Quality Improvement
- EHR Department
- IT Department



# Programs to Manage Care

- Social Work Care Management
- Complex Care Management
- Chronic Disease Management

# Care Management Programs





# MACIPA Diabetes Management Report





Part of MACIPA's 2009 Quality Initiatives is to ensure all of its diabetic patients are receiving comprehensive diabetic care. The national recommendation is that all diabetics receive at least 1 LDL test, 2 HbA1c tests, screening for nephropathy, and one eye exam annually. The patients listed below are missing at least one of these tests. We are asking for you to outreach to these patients and schedule the appropriate screening(s) by the end of the year. Data comes from BCBS claims processed through the end of July, 2009; so some patients may have recently received these test(s).

Member Name	Member DOB	Sex	LDL Test	Eye Exam	Hba1c Test 1st Latest	Hba1c Test 2nd Latest	Nephropathy Screening	Result of Outreach (date(s) patient was called, date of appt scheduled, etc.)
<input type="text"/>		F	5/29/2009		5/29/2009	5/1/2009	5/29/2009	
<input type="text"/>		M		5/19/2009			3/23/2009	
<input type="text"/>		M	2/25/2009	6/18/2009	2/25/2009		2/25/2009	
<input type="text"/>		F	4/3/2009		6/24/2009	4/3/2009	6/24/2009	
<input type="text"/>		F	6/2/2009		6/2/2009	3/22/2009	6/2/2009	
<input type="text"/>		F	7/21/2009		7/21/2009		7/21/2009	
<input type="text"/>		F	3/25/2009	4/9/2009	3/25/2009		5/12/2009	
<input type="text"/>		F	7/14/2009	2/11/2009	7/14/2009		7/14/2009	
<input type="text"/>		F	2/9/2009		6/18/2009	5/11/2009	6/18/2009	

Please fax back to  Project Assistant, at (617)  by October 31st, 2009.

MACIPA Quality Department

# MACIPA Quality Outreach List - Cancer Screenings



MACIPA analyses indicate that the patients listed below are missing one, two or all three of the following recommended screenings:

- mammogram screening for breast cancer in 2008 or 2009
- Pap smear screening for cervical cancer in 2007, 2008 or 2009
- appropriate form of screening for colorectal cancer
  - colonoscopy in the past ten years
  - flexible sigmoidoscopy or double contrast barium enema (DCBE) in the past five years
  - fecal occult blood test (FOBT) in 2009

**Please call these patients and schedule them for the appropriate cancer screening by 12/31/2009. Please note either the date of the exam that you scheduled or a minimum of three times that you attempted to contact them. Fax back to (617) [ ] no later than September 30, 2009.**

				PT IS OVERDUE FOR ITEMS INDICATED BY 'X' AND REQUIRES OUTREACH			FILL IN THIS SECTION AND RETURN BY 9/30/2009	
Last	First	DOB	Sex	Mammo-graphy	Pap Smear	Colorectal Screening	Result of Outreach (date(s) patient was called, date of appt scheduled, etc.)	Remove From List
[ ]	[ ]	[ ]	M			X	[ ]	<input type="checkbox"/>
[ ]	[ ]	[ ]	M			X	[ ]	<input type="checkbox"/>
[ ]	[ ]	[ ]	F	X	X		[ ]	<input type="checkbox"/>
[ ]	[ ]	[ ]	F	X			[ ]	<input type="checkbox"/>
[ ]	[ ]	[ ]	F			X	[ ]	<input type="checkbox"/>
[ ]	[ ]	[ ]	M			X	[ ]	<input type="checkbox"/>
[ ]	[ ]	[ ]	F		X	X	[ ]	<input type="checkbox"/>

**Please fax back to [ ] Project Assistant, at (617) [ ] by September 30, 2009.**

MACIPA Quality Department - 2009 Quality Bonus Program

# MACIPA Quality Outreach List - Pediatric Well Visits by Age 15 Months





Please call these patients and schedule them for at least six well visits before they turn 15 months. Please note either the date of the exam that you scheduled or a minimum of three times that you attempted to contact them. Fax back to 617-259-2173 no later than September 30, 2009.

Member Last	Member First	DOB	Well Visit 1	Well Visit 2	Well Visit 3	Well Visit 4	Well Visit 5	Well Visit 6	Result of Outreach
									(date(s) patient was called, date of appt scheduled, etc.)
<input type="text"/>	<input type="text"/>	<input type="text"/>	4/24/2008	6/9/2008	7/31/2008	10/10/2008	1/23/2009	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	12/1/2008	2/26/2009	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	6/23/2008	7/18/2008	8/20/2008	10/17/2008	12/12/2008	<input type="text"/>	<input type="text"/>

Please fax back to  Project Assistant, at (617)  by September 30, 2009.

MACIPA Quality Department - 2009 Quality Bonus Program



## BCBS Diabetes Lab Test Outcomes Management Report

Patients with Diabetes whose most recent:

LDL  $\geq$  100 mg/dL or unknown\*

HbA1c  $\geq$  9% or unknown\*

PCP:

Pod: 03

Patient Detail		DOB	Latest HbA1c Test Date	Latest HbA1c Value†	2nd Latest HbA1c Test Date	2nd Latest HbA1c Value†	Latest Lipid Test Date	Latest Lipid Value†	2nd Latest Lipid Test Date	2nd Latest Lipid Value†
<div> <div></div> <div></div> </div> <p>[ ] check here if patient receives diabetes care at Joslin Clinic</p>		<input type="text"/>	03/23/09	6.1	12/16/08	6.0	03/23/09	125	12/16/08	146
Active Medications/Date Filled‡ (Last 6 Months)		<div> <div>AZITHROMYCIN TAB 250MG (4/16/2009)</div> <div>CASODEX TAB 50MG (2/3/2009)</div> </div> <div> <div>IOPHEN C-NR LIQ 100-10/5 (4/16/2009)</div> <div>JANUVIA TAB 100MG (2/3/2009)</div> </div> <div> <div>LESCOL XL TAB 80MG (2/3/2009)</div> <div>LISINOPRIL TAB 10MG (2/3/2009)</div> </div> <div> <div>METFORMIN TAB 1000MG (2/3/2009)</div> <div>METOPROL TAR TAB 25MG (2/5/2009)</div> </div> <div> <div>TRICOR TAB 145MG (2/3/2009)</div> </div>								
<b>Comments/Action Plan</b> Fill out all of the following four action plan items  1. Medication adjustment 2. Next visit scheduled for: _____ 3. Next lab test scheduled for: _____ 4. Plan to bring this patient's parameters to goal: _____										

### Instructions:

1. Provide an action plan for the patient listed
  2. Fill in lab values that the report is missing
  3. Return this form to the MACIPA Quality Dept. by fax at  where it will be reviewed.
- The due date for submission is Friday, June 26, 2009.

\*Patients denoted with a heart icon have been identified via BCBS medical claims as having diabetes AND cardiovascular conditions.

†Test results are gathered from Mount Auburn Hospital labs, Quest Labs, Belmont Labs, chart reviews, and physician self-reporting.

‡Active Medications are listed for those patients who have the pharmacy benefit with the health plan.

### Data Source

(Data current as of date shown)

Medical Claims: 04/30/09	MAH Labs: 05/22/09	Quest Labs: 05/28/09	Belmont Labs: 06/01/09
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# Lessons Learned

- Physicians can band together to act collectively to improve care of a defined population
  - Re-assert our professionalism
- Leadership
  - Adapt to changing conditions
  - Empathy for the losses inherent to change
- Importance of establishing strategic partnerships and relationships of trust with other key players in the healthcare arena
- Critical roles of infrastructure and appropriate incentives